

ATTACHMENT A

QUALIFICATIONS QUESTIONNAIRE

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The City is interested in entering into a relationship with a consultant who is able to assist with Fort Hood Joint Land Use Study. This will require a consultant who is experienced with cities in Texas and/or other public entities, and who is available and accessible to the Staff and Employees. To assist in the evaluation of qualifications, please answer the following questions:

1. Please explain what separates your company from its competitors and what specifically qualifies you to be a consultant for the City.
2. Please describe your philosophy for encouraging public participation.

TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION IS TRUE AND CORRECT.

Name and Signature of Principal

(Name)

(Signature)

Title of Principal: _____

Company Name: _____

Date: _____

ATTACHMENT B

COMPLETED RESPONDENT'S CERTIFICATION FORM

RESPONDENT'S CERTIFICATION

NOTE: THIS PAGE MUST BE INCLUDED WITH YOUR RESPONSE

I, the undersigned, by signing the following statement agree that I have read and understand all of the instructions, specifications, and terms and conditions contained on each page of this Request for Proposals. I also understand that if this response is accepted by The City of Killeen that all of the instructions, specifications, and terms and conditions submitted in my response and any additions, changes, or deletions made during negotiations will be made a part of this response under a binding Contract between my Company and the City of Killeen, Texas. I also certify that this response is made without previous understanding, agreement, or connection with any person, firm, or corporation making a response for the same materials, and is in all fair and without collusion or fraud:

Our company is a (Check One):

Corporation _____ (The response MUST be signed by an Officer of the company)
Partnership _____ (The response MUST be signed by a General Partner)
Joint Venture _____ (The response MUST be signed by an Officer of the company)
Sole Proprietor _____ (The response MUST be signed by the Owner)

Compensation requirements:

Any compensation paid to the Respondent concerning the products and services should be outlined in detail in the response on a page immediately following the Respondent's Certification. The undersigned agrees not to accept remuneration or commission from any other source for any services related in the response.

AUTHORIZED COMPANY REPRESENTATIVE PLEASE SIGN BELOW:

NAME (TYPED/PRINTED):

SIGNATURE: _____ DATE: _____

[Your signature attests to your offer to provide the goods and/or services in this response according to the published provisions of this Request for Proposals. Contract is not valid until response/Contract is approved by the Killeen City Council. When an award letter is issued, it becomes a part of this contract.]

[Appropriate Acknowledgment must be completed]

CORPORATE ACKNOWLEDGMENT: RFP FOR FORT HOOD JOINT LAND USE STUDY

THE STATE OF _____ §
COUNTY OF _____ §

BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared:

(Print Name)

(Print Title)

of the corporation known as _____, known to me to be the person and officer whose name is subscribed to the foregoing instrument and acknowledged to me that the same was the act of said corporation, that he or she was duly authorized to perform the same by appropriate resolution of the board of directors of such corporation and that she or he executed the same as the act of such corporation for the purposes and consideration therein expressed, and in the capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the ____ day of _____ 2015.

Notary Public In and For _____ County,

My Commission expires:

SOLE PROPRIETORSHIP ACKNOWLEDGMENT FORM: RFP FOR FORT HOOD JOINT LAND USE STUDY

THE STATE OF _____ §
COUNTY OF _____ §

BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared _____ known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the ____ day of _____ 2015.

Notary Public In and For _____ County,

My Commission expires:

PARTNERSHIP ACKNOWLEDGMENT FORM RFP FOR CAMPS SWIFT JOINT LAND USE STUDY

THE STATE OF _____ §
COUNTY OF _____ §

BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day appeared:

(Print Name)

(Print Title)

of _____ a partnership, known to me to be the person and partner whose name is subscribed to the foregoing instrument and acknowledged to me that the same was the act of the said partnership, and that he or she was duly authorized as a partner of such partnership to perform same for the purpose and consideration therein expressed, and in the capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the ____ day of _____ 2015.

Notary Public In and For _____ County,

My Commission expires:

ATTACHMENT C

EXCEPTIONS/DEVIATIONS TO SPECIFICATIONS

RFP FOR
FORT HOOD JOINT LAND USE STUDY

NOTE: THIS PAGE MUST BE INCLUDED WITH YOUR RESPONSE

EXCEPTIONS/DEVIATIONS TO SPECIFICATIONS

Please initial:

_____ We have not made exceptions or deviations to specifications

_____ We have made exceptions or deviations to specifications. Please list
exceptions/deviations in the space below:

FIRM NAME: _____

SIGNATURE OF PERSON AUTHORIZED TO SIGN ON BEHALF OF FIRM:

SIGNER'S NAME AND TITLE

DATE _____

ATTACHMENT D

COMPLETED W-9